FOD: 9-15-11

Inspection Case File Activity Diary

U.S. Department of Labor
Occupational Safety and Health Administration

Company Name: APPLE
Management Official: Rob Proffer
Telephone #: 314-290-0400 Alternate #:
Fax #: 314-290-0401

Inspection #: 315814343
Complaint #: 208456384
Referral #:
CSHO ID #: (b) (7)(C),

Date	Action	Initials
8/5/11	Opened inspection	(b) (7)(C), (b) (7)(E)
8/8/11	Interviewed complainant over phone	
8/8/11	Returned to store to interview workers.	
8/24/11	Submitted case for review	
08/23/11	Signed cit's, saved IB's final & mailed	
08/24/11	mailed letter to complainant	
8/24/11	Rob called, gave info on pkg and went over closing conf again	
8/24/11	Abatement photo received only waiting for pymt	
10-17-11	Sent Debt Collection Letter	
11-18-11	Rec'd Payment & Processed (paid in full)	
11-18-11	Closed	

00618-00618

US

APPLE INC.
12545 RIATA VISTA CIRCLE
ATTN: CASH DISBURSEMENTS MS:198-2AP
AUSTIN, TX 78727

U.S. DEPARTMENT OF LABOR/W. HOFMANN
1222 SPRUCE STREET, ROOM 9.104
SAINT LOUIS, MO 63103-2818

Check No.	0002159668
Check Date	11/11/2011
Check Amount	$1,517.00
Vendor Number	0TA06

Invoice Date	Description	Gross Amount	Discount	Net Amount
10/17/2011	315814343	$1,517.00		$1,517.00
			TOTAL	$1,517.00

⬇ PLEASE FOLD ON PERFORATION AND DETACH HERE ⬇

PAGE 1/1

Penalty Payment Report

11/18/11

U.S. Department of Labor - OSHA
1222 Spruce Street
Room 9.104
St. Louis , MO 63103

853151173

Reporting ID = 0729300 OSHA163 = 11/18/11
Refund
Unhonored Check

Line	Inspection	Establishment Name	Penalty Amount	FTA Amount	Total Amount
001	315814343	APPLE, INC.	$ 1517.00	$ 0.00	$ 1517.00
002	(b) (7)(C)	[redacted]			
003					
004					
005					
006					

Batch Total : $ 4447.16

VERIFY THE AUTHENTICITY OF THIS MULTI-TONE SECURITY DOCUMENT. CHECK BACKGROUND AREA CHANGES COLOR GRADUALLY FROM TOP TO BOTTOM.

ED: 0729300 INSP: 315814343 Recd 11-18-11

APPLE INC.
12545 RIATA VISTA CIRCLE
ATTN: CASH DISBURSEMENTS MS:198-2AP
AUSTIN, TX 78727

CHECK NO. 0002159668
NOVEMBER 11, 2011
70-2328/719

TO THE ORDER OF U.S. DEPARTMENT OF LABOR/W. HOFMANN
1222 SPRUCE STREET, ROOM 9.104
SAINT LOUIS, MO 63103-2818

********1,517.00***

VOID AFTER 90 DAYS

PAY EXACTLY **ONE THOUSAND FIVE HUNDRED SEVENTEEN AND NO/100 DOLLARS**

Bank of America N.A.
Commercial Disbursement Account
Northbrook, Illinois

AUTHORIZED SIGNATURE

(b) (4) [redacted]

U.S. Department of Labor

Occupational Safety and Health Administration
1222 Spruce Street, Room 9.104
St. Louis, Missouri 63103
(314) 425-4249 or (800) 392-7743

Reply to the Attention of: (b) (7)(C), (b) (7)(E) **RESPONSE TEAM LEADER**

October 17, 2011

Attn: Mr. Rob Proffer
APPLE, INC.
2440 St. Louis Galleria
St. Louis, MO 63117

Inspection Number: 315814343
Reporting ID : 0729300
Due Date : September 9, 2011

Dear Mr. Proffer:

A notification of payment due for penalties assessed under the Occupational Safety and Health Act was sent to your firm on August 24, 2011. Payment was due on the date shown above and our records show that full payment has not been received. Unless payment is already in the mail, the unpaid balance shall be deemed delinquent.

Pursuant to the Debt Collection Act of 1982 (Public Law 97-365) and regulations of the Department of Labor (29 CFR Part 20), effective March 8, 1985, the Occupational Safety and Health Administration is required to assess interest, as well as delinquent and administrative charges for overdue penalties. If the total amount due is not paid within one month of the date this letter is received, the matter will be referred to the National Office of the Occupational Safety and Health Administration in Washington, D.C. for further action. The National Office will assess additional interest and administrative charges. If the penalty is delinquent for more than three (3) months, a delinquent charge of six percent (6%) a year accruing from the date that the debt became delinquent, will also be assessed.

Further, you should be aware that, pursuant to the provisions of the Debt Collection Act, it is the policy of the Department of Labor and the Occupational Safety and Health Administration to disclose information concerning delinquent claims to commercial credit reporting agencies, to utilize the services of private debt collectors and to report information on unpaid debts to the Internal Revenue Service. To preclude exercise of the authorities discussed above and to avoid incurring additional charges, please remit the total amount due as indicated below:

A review of our records indicates that you have paid: $ 0.00

The current unpaid balance of the total penalty assessed is: $1517.00

TOTAL AMOUNT NOW DUE $1517.00

If you have recently submitted a payment covering the total amount of the penalty due, please disregard this notice. If you are unable to submit full payment at this time, or if you have any questions, please contact me immediately. If you wish to enter into a written agreement to repay this debt, please contact Mr. Hofmann. Thank you.

Sincerely,

(b) (7)(C), (b) (7)(E)

for

William D. McDonald, CSP
Area Director

WDM/jb



Attachment Photo Received 8/24/2011


MAUX
Property of AT&T
Authorized
Personnel Only
In case of emergency, or prior to performing maintenance on this site, call 800-638-2822 and reference cell site number M02994
atat
INFORMATION
INFORMACION
SIEMENS

U.S. Department of Labor

Occupational Safety and Health Administration
1222 Spruce Street, Room 9.104
St. Louis, Missouri 63103
(314) 425-4249 or (800) 392-7743

Reply to the Attention of: Response Team Leader

August 24, 2011

(b) (7)(C)
[redacted]

Dear (b) (7)(C)
[redacted]

In response to your formal complaint concerning safety and/or health hazards at:

APPLE, INC.
2440 St. Louis Galleria
St. Louis, MO 63117,

the Occupational Safety and Health Administration conducted an inspection there. That inspection was completed on August 8, 2011.

The results of our investigation of your complaint items are as follows: We found that the electric panels were blocked on the date of the inspection. In addition, an opening was found on a junction box. Attached for your information is a copy of the OSHA-2, Citation and Notification of Penalty, which was sent to your employer on August 24, 2011 and should have been posted at the workplace for at least three days after receipt.

If you do not agree with our inspection results, you may contact Response Team Leader or me at the above address or telephone number for a clarification of the matter. Your identity will be withheld unless you explicitly request that it be revealed.

Section 11(c) of the OSH Act provides protection for employees against discrimination because of their involvement in protected safety and health related activity. If you believe you are being treated differently or action is being taken against you because of your safety or health activity, you may file a complaint with OSHA. You should file this complaint as soon as possible, since OSHA normally can accept only those complaints filed within 30 days of the alleged discriminatory action.

Thank you for your concern for a safe and healthful workplace.

Respectfully,

(b) (7)(C), (b) (7)(E)
[redacted]

for William D. McDonald
Area Director

Enclosure

U.S. Department of Labor
Occupational Safety and Health Administration
1222 Spruce Street
Room 9.104
St. Louis, MO 63103
Phone: (314)425-4249 FAX: (314)425-4289

CITATION AND NOTIFICATION OF PENALTY

Reply to the Attention of: Response Team Leader
Inspection Number: 315814343
Inspection Dates: 08/05/2011 - 08/08/2011
Issuance Date: 08/24/2011

TO:

APPLE, INC.
and its successors
2440 St. Louis Galleria
St. Louis, MO 63117

Inspection Site:

2440 St. Louis Galleria
St. Louis, MO 63117

Enclosed you will find citations for violations of the Occupational Safety and Health Act of 1970 (the Act) which may have accompanying proposed penalties. Also enclosed is a booklet entitled "Employer Rights and Responsibilities Following an OSHA Inspection," (OSHA 3000) revised 1999, which explains your rights and responsibilities under the Act. The violation(s) described in this Citation and Notification of Penalty is alleged to have occurred on or about the day(s) the inspection was made unless otherwise indicated within the description given.

The OSHA St. Louis Area Office is extending the opportunity for your company to participate in a special program which is designed to achieve expedited abatement of hazards and reach resolution of cases without contest or litigation. Under the program, an employer and OSHA can enter into an Informal Settlement Agreement through the mail without going through the formal procedure of conducting an informal conference. This offer is based on your willingness to correct the violation(s) by the date(s) specified in the citation(s), and the general absence of other factors such as a poor safety track record which would disqualify you from participating in the program.

If you elect to participate in this Expedited Informal Settlement Program, you must promptly proceed with the following steps to ensure your continued eligibility:

1. Read the enclosed Informal Settlement Agreement. A key element of the agreement calls for OSHA to agree to a 30% reduction in the total amount proposed, in exchange for prompt abatement of the violation(s). To ensure this agreement: return a signed Informal Settlement Agreement and a check within 15 working days of receipt of the citation(s).

2. Sign the Informal Settlement Agreement and return it with a check for the full amount of the reduced penalty. The check and the agreement **must** be signed by you or your designee and delivered or postmarked to this office no later than the end of the 15-working day contest period (which begins from the date you received this certified letter). OSHA will then sign the agreement and send a copy back to you.

3. You must agree to correct all of the violation(s) **by the date(s)** shown on the citation(s) **and** provide objective evidence of the corrections (e.g., drawings or photographs of corrected conditions, purchase/work orders related to abatement actions, air sampling results, etc.)

4. You must prepare a written certification that all of the violations have been corrected. A copy of the certification form must be posted for employees to see, and a copy must be sent to this office. For your convenience, a copy of the Certification Form has been provided with this mailing.

5. Should you encounter difficulty in correcting any of the violations by the agreed-upon abatement dates listed on the citation(s), and you can show just cause for the delay, a new abatement date can be set if you **promptly** contact this office **before** the abatement date elapses.

NOTE: Failure to comply with any of the terms set forth in the agreement will cause the penalty to revert back to the original proposed penalty amount.

The enclosed Expedited Informal Settlement Agreement can be used where the primary issue is the dollar amount of the proposed penalties. If you wish to dispute the validity of the violations, or the classifications of the violations, or insist on further reductions in penalties, then the Expedited Informal Settlement Agreement cannot be used. You must then follow the procedures to file a timely notice of contest with this office. An informal conference will be scheduled only for purposes of discussing ways to abate the violations, or how to make improvements in your safety and health program.

You may contest the citation(s) by filing a written notice of contest postmarked within the 15-working-day period after receipt of the citation(s), and a hearing date before an Administrative Law Judge will be set.

Should you have any questions regarding this letter and the enclosed Informal Settlement Agreement, please contact this office.

NOTICE TO EMPLOYEES

The law gives you or your representative the opportunity to object to any abatement date set for a violation if you believe the date to be unreasonable. Any contest to the abatement dates of the citations must be mailed to the U. S. Department of Labor, St. Louis Area OSHA Office at the address above and postmarked within 15 working days (excluding weekends and Federal Holidays) of the receipt by the employer of the Citation and Notification of Penalty.

CERTIFICATE OF CORRECTION

The undersigned certifies that on _____ all of the violations cited
date

in OSHA Citations issued on _____, were corrected and that a copy
date

of this Certificate of Correction was posted _____ in a manner and
date

place for affected employees to see.

_____

Employer's signature

U.S. DEPARTMENT OF LABOR
OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

In the Matter of: APPLE, INC.
OSHA No.(s): 315814343

INFORMAL SETTLEMENT AGREEMENT

The undersigned Employer and the undersigned Occupational Safety and Health Administration (OSHA), in settlement of the above citation(s) and penalties which were issued on 08/24/2011, hereby agree as follows:

1. The Employer agrees to correct the violations as cited in the above citations or as amended below.

2. The Employer agrees that a letter of corrective action stating the manner in which each violation was abated, including evidence of corrective actions taken, will be forwarded to the Area Director by the abatement date specified for each violation.

3. Upon correction of all violations, the Employer agrees to provide a written certification to the Area Director that all of the violations have been corrected. The Employer agrees to post a copy of the written certification form for a period of 3 working days in the place where the citations were posted as described in paragraph 6 of this agreement.

4. The Employer agrees to pay the reduced penalties totaling $1061.90 and remit the payment to the Area Director with this agreement. The employer agrees that failure to comply with the terms of this Agreement shall cause the penalty to revert to the initially proposed penalty of $1517.00.

5. In consideration of the foregoing amendment(s) to the citation(s), the Employer hereby waives its right to contest said citation(s) pursuant to Section 10(c) of the Occupational Safety and Health Act of 1970. It is understood and agreed by the Occupational Safety and Health Administration and the Employer that the citation(s) as amended by this agreement shall be deemed a final order not subject to review by any court or agency.

6 The employer agrees to immediately post a copy of this Settlement Agreement in a prominent place at or near the location of the violation(s) referred to in paragraph 1 above. This Settlement Agreement must remain posted until the violations cited have been corrected, or for 3 working days (excluding weekends and Federal Holidays), whichever is longer.

7. The employer agrees to continue to comply with the applicable provisions of the Occupational Safety and Health Act of 1970, and the applicable safety and health standards promulgated pursuant to the Act.

8. Each party agrees to bear its own fees and other expenses incurred by such party in connection with any stage of this proceeding.

For the Occupational Safety and Health Administration:

_____

William D. McDonald, Area Director (signature and date)

For the Employer:

_____

signature and date

NOTICE TO EMPLOYEES

The law gives you or your representative the opportunity to object to any abatement date set for a violation if you believe the date to be unreasonable. Any contest to the abatement dates of the citations amended in paragraph 4 of this Settlement Agreement must be mailed to the U.S. Department of Labor Area Office at 1222 Spruce Street, Room 9.104, St. Louis, MO 63103, within 15 working days (excluding weekends and Federal Holidays) of the receipt by the Employer of this Settlement Agreement. You or your representative also have the right to object to any of the abatement dates set for violations, which were not amended, provided that the objection is mailed to the office shown above within the 15-working-day period established by the original citation.

NOTICE TO EMPLOYEES OF INFORMAL CONFERENCE

An informal conference has been scheduled with OSHA to discuss the citation(s) issued on 08/24/2011. The conference will be held at the OSHA office located at 1222 Spruce Street, Room 9.104, St. Louis, MO, 63103 on _____ at _____. Employees and/or representatives of employees have a right to attend an informal conference.

Citation and Notification of Penalty

Company Name: APPLE, INC.
Inspection Site: 2440 St. Louis Galleria, St. Louis, MO 63117

Citation 1 Item 1 Type of Violation: Serious

29 CFR 1910.303(g)(1)(ii): Working space about electric equipment rated 600 volts, nominal, or less was used for storage:

The working space in front of the 4 Square D electric panels, maximum 240 volts, were used for storage of store product.

Date By Which Violation Must be Abated:	Quick Fix
Proposed Penalty:	$ 1517.00

Citation and Notification of Penalty

Company Name: APPLE, INC.
Inspection Site: 2440 St. Louis Galleria, St. Louis, MO 63117

Citation 2 Item 1 Type of Violation: Other

29 CFR 1910.305(b)(1)(i): Openings through which conductors enter boxes, cabinets, or fittings were not effectively closed:

The opening where the cable exited the bottom of the electric box was not closed.
Location: Above the Siemens Repeater in the back office area of the Apple Store at the Galleria Mall.

Abatement certification and abatement documentation is required for this violation. The documentation should include written verification of abatement, applicable measurements or monitoring results, and photographs or videos which you believe will be helpful. The abatement certification sheet is enclosed with the citations.

Date By Which Violation Must be Abated:	10/10/2011
Proposed Penalty:	$ 0.00

(b) (7)(C), (b) (7)(E) [redacted]

William D. McDonald
Area Director

08/23/11

Occupational Safety and Health Administration
1222 Spruce Street
Room 9.104
St. Louis, MO 63103
Phone: (314)425-4249 FAX: (314)425-4289

INVOICE/
DEBT COLLECTION NOTICE

Summary of Penalties for Inspection Number 315814343

Citation 1, Serious	=	**$**	**1517.00**
Citation 2, Other	=	**$**	**0.00**
TOTAL PROPOSED PENALTIES	=	**$**	**1517.00**

To avoid additional charges, please remit payment promptly to this Area Office for the total amount of the uncontested penalties summarized above. Make your check or money order payable to: "DOL-OSHA". Please indicate OSHA's Inspection Number (indicated above) on the remittance.

OSHA does not agree to any restrictions or conditions put on any check or money order for less than the full amount due and will cash the check or money order as if these restrictions or conditions do not exist.

If a personal check is issued, it will be converted into an electronic fund transfer (EFT). This means that our bank will copy your check and use the account information on it to electronically debit your account for the amount of the check. The debit from your account will then usually occur within 24 hours and will be shown on your regular account statement. You will not receive your original check back. The bank will destroy your original check, but will keep a copy of it. If the EFT cannot be completed because of insufficient funds or closed account, the bank will attempt to make the transfer up to 2 times.

Pursuant to the Debt Collection Act of 1982 (Public Law 97-365) and regulations of the U.S. Department of Labor (29 CFR Part 20), the Occupational Safety and Health Administration is required to assess interest, delinquent charges, and administrative costs for the collection of delinquent penalty debts for violations of the Occupational Safety and Health Act.

Interest. Interest charges will be assessed at an annual rate determined by the Secretary of the Treasury on all penalty debt amounts not paid within one month (30 calendar days) of the date on which the debt amount becomes due and payable (penalty due date). The current interest rate is 3%. Interest will accrue from the date on which the penalty amounts (as proposed or adjusted) become a final order of the Occupational Safety and Health Review Commission (that is, 15 working days from your receipt of the Citation and Notification of Penalty), unless you file a notice of contest. Interest charges will be waived if the full amount owed is paid within 30 calendar days of the final order.

Delinquent Charges. A debt is considered delinquent if it has not been paid within one month (30 calendar days) of the penalty due date or if a satisfactory payment arrangement has not been made. If the debt remains delinquent for more than 90 calendar days, a delinquent charge of six percent (6%) per annum will be assessed accruing from the date that the debt became delinquent.

Administrative Costs. Agencies of the Department of Labor are required to assess additional charges for the recovery of delinquent debts. These additional charges are administrative costs incurred by the Agency in its attempt to collect an unpaid debt. Administrative costs will be assessed for demand letters sent in an attempt to collect the unpaid debt.

(b) (7)(C), (b) (7)(E)

William D. McDonald, CSP
Area Director

08/23/11
Date

Corrective action taken by you for each alleged violation should be submitted to this office on or about the abatement dates indicated on the Citation and Notification of Penalty.

If the hazards itemized on this citation(s) are not abated/corrected and a follow-up inspection is conducted, your establishment may receive a Failure to Abate Citation for the uncorrected hazards with subsequent additional monetary penalties of up to thirty (30) times the original penalty amount of the uncorrected hazards.

A work sheet has been provided to assist in providing the required abatement information. A completed copy of this work sheet should be posted at the worksite with the Citation(s).

CERTIFICATION OF CORRECTIVE ACTION WORKSHEET

Company Name: APPLE, INC.
Inspection Site: 2440 St. Louis Galleria, St. Louis, MO 63117
Issuance Date: 08/24/2011

List the specific method of correction for each item on this citation in this package that does not read "Corrected During Inspection" and return this page with the signed Informal Settlement Agreement to: **U.S. Department of Labor - Occupational Safety and Health Administration, 1222 Spruce Street, Room 9.104, St. Louis, MO 63103.**

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

NAME OF COMPANY OFFICIAL **DATE**

_____

TITLE

NOTE: 29 USC 666.(g): Whoever knowingly makes any false statements, representation or certification in any application, record, plan or other documents filed or required to be maintained pursuant to the Act shall, upon conviction, be punished by a fine of not more that $10,000, or by imprisonment for not more than six months or both.

POSTING: A copy of the completed Corrective Action Worksheet should be posted for employee review.

7008 1300 0000 3626 2385

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For delivery information visit our website at www.usps.com®

OFFICIAL USE

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Tota	

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Street or PO

City, State, ZIP+4

APPLE, INC.
2440 St. Louis Galleria
St. Louis, MO 63117

PS Form 3800, August 2006 See Reverse for Instructions

Delivered 8-24-11 per U.S.P.S.

U.S. Department of Labor

Daily Sign-In/Sign-Out Sheet

Agency: _____ Date: 9-7-11

Office/Division: _____ Pay Period: _____

In	Signature	Out	Signature

OSHA 1

U.S. Department of Labor
Occupational Safety and Health Administration

Inspection Report

Mon Aug 22, 2011 6:09pm

Rpt ID	Assignment Nr.	CSHO ID	Supervisor ID	Inspection Nr.	Opt. Insp. Nr.
0729300	0	(b) (7)(C), (b) (7)(E)		315814343	2011-069

Establishment Name	APPLE, INC.				
Site Address	2440 St. Louis Galleria St. Louis, MO 63117	Site Phone	(314) 290-0400	Site FAX	
Mailing Address	2440 St. Louis Galleria St. Louis, MO 63117	Mail Phone	(314) 290-0400	Mail FAX	
Controlling Corp		Employer ID		942404110	
Ownership	A. Private Sector	City	7080	County	510
Legal Entity		Previous Activity (State Only)			

Related Activity					
Type	Number	Satisfied	Type	Number	Satisfied
C. Complaint	208456384	Safety			

		(b) (4)				
Employed in Establishment			Advance Notice?	No	Category	S. Safety
Covered By Inspection			Union?	No	Interviewed?	Yes
Controlled By Employer			Walkaround?	Yes		
Primary SIC	5734		Secondary SIC		Inspected	
Primary NAICS	443120		Secondary NAICS		NAICS Inspected	

Inspection Type	B. Complaint	Reason No Inspection	
Scope of Inspection	B. Partial Inspection		
Classification	Safety Planning Guide/Manufacturing		
Strategic Initiatives			
National Emphasis			
Local Emphasis			

Anticipatory Warrant Served?	No	Denial Date	Date ReEntered	Date ReDenied	ReEntered
Anticipatory Subpoena Served?	No				

Entry	08/05/11		First Closing Conference	08/05/11	
Opening Conference	08/05/11		Second Closing Conference	08/08/11	
Walkaround	08/05/11		Exit	08/08/11	
Days On Site	2		Case Closed		
			No Citations Issued		

Type	ID	Optional Information

CSHO Signature	(b) (7)(C), (b) (7)(E)	Date	8/22/11

OSHA 7

U. S. Department of Lab
Occupational Safety and Health Administration

Notice of Alleged Safety or Health Hazards

Wed Aug 3, 2011 12:41pm

			Complaint Number	208456384
Establishment Name	APPLE, INC.			
Site Address	2440 St. Louis Galleria, St. Louis, MO 63117			
	Site Phone	(314) 290-0400	Site FAX	
Mailing Address	2440 St. Louis Galleria, St. Louis, MO 63117			
	Mail Phone	(314) 290-0400	Mail FAX	
Management Official	Robert Proffer		Telephone	
Type of Business	Retail Computer Store		Ownership	
Primary SIC	5734		Primary NAICS	443120

HAZARD DESCRIPTION/LOCATION. Describe briefly the hazard(s) which you believe exist. Include the approximate number of employees exposed to or threatened by each hazard. Specify the particular building or worksite where the alleged violation exists.

DESCRIPTION:

1) There are ladders, boxes, trash, and other carts blocking access to the electrical panels, restricting exits and aisles.

2) There is a work area that has been setup in a space that is near high voltage equipment with no warning labels.

LOCATION:

Technician area and store

U. S. Department of Labor
Occupational Safety and Health Administration

Notice of Alleged Safety or Health Hazards

Complaint Number	208456384

Establishment Name	Apple, Inc.			
Site Address	2440 Saint Louis Galleria St. Louis MO 63117			
	Site Phone	314-290-0400	Site FAX	
Mailing Address	same as above			
	Mail Phone		Mail FAX	
Management Official	Robert Proffer		Telephone	
Type of Business	Retail Computer Store			

HAZARD DESCRIPTION/LOCATION. Describe briefly the hazard(s) which you believe exist. Include the approximate number of employees exposed to or threatened by each hazard. Specify the particular building or worksite where the alleged violation exists.

- There are ladders, boxes, trash, and other carts blocking access to the electrical panels. There are approx. (b) (4) employees at this location. I've sent an e-mail with pictures (b) (7)(C), (b) (7)(E)
- There is also a work area that has been setup in a space that is near high voltage equipment with no warning labels
- The bathroom facility had no exhaust fan until the week of July 24th. We have been working in this space since Oct. 15th 2010.

Has this condition been brought to the attention of:	☒ Employer ☐ Other Government Agency(specify)
Please Indicate Your Desire:	☐ Do NOT reveal my name to my Employer ☒ My name may be revealed to the Employer
The Undersigned believes that a violation of an Occupational Safety or Health standard exists which is a job safety or health hazard at the establishment named on this form.	(Mark "X" in ONE box) ☒ Employee ☐ Federal Safety and Health Committee ☐ Representative of Employees ☐ Other (specify) _____
Complainant Name	(b) (7)(C) [redacted]
Address(Street,City,State,Zip)	
Signature	
If you are an authorized represent represent and your title:	
Organization Name: Your Ti	

Has this condition been brought to the attention of:	**Employer**
Please Indicate Your Desire:	**Do NOT reveal my name to the Employer**
The Undersigned believes that a violation of an Occupational Safety or Health standard exists which is a job safety or health hazard at the establishment named on this form.	**A. Employee**

Complainant Name	(b) (7)(C)	Telephone	(b) (7)(C)
Address(Street,City,State,Zip)			
Signature		Date	

If you are an authorized representative of employees affected by this complaint, please state the name of the organization that you represent and your title:

Organization Name: Your Title:

OFFICIAL USE ONLY:

Identification	Reporting ID: **0729300**	Previous Activity: **0**	Opt. Number: **2032**			
	Establishment Name Change? ☐Yes ☐No	Site Address Change? ☐Yes ☐No	Employer ID	City Code: **7080**	County Code: **510**	
Receipt Information	Received By	Send OSHA-7? ☐ Yes ☐ No	Date: **08/03/11** Time: AM PM	Supervisor(s) Assigned: **O9851**		
Industry & Ownership	A. Private Sector					
Complaint Evaluation	Evaluated By Is this a Valid Complaint? -- **Yes** Formality -- **Formal** Migrant Farmworker Camp? --	Subject/Severity **Safety-Serious**				
Send Letter	Type			Date Letter Sent	Date Response Due	
Received Letter	Type			Date Letter Received	Evaluation	Abatement Date
	B. Signed Osha-7 Returned			**08/02/11**		
Complaint Action	Inspection Planned? **Yes**	If Yes, Priority: **1**	If No, Reason:			
	Transfer To (Name)		Transfer Date			
	Transfer To Category					
Strategic Initiatives	**ELECTRICAL**					
National Emphasis						
Local Emphasis	**ELECGI ELECTRICAL**					

Optional Information	Type	ID	Value

Close Complaint	

COMMENTS

OSHA/A

U.S. Department of Labor
Occupational Safety and Health Administration

Inspection Narrative

Mon Aug 22, 2011 5:23pm

Inspection Nr.	**315814343**
Opt. Case Number	**2011-069**

Establishment Name	**APPLE, INC.**		
Legal Entity		Type of Business	**Retail Store**

Additional Citation Mailing Addresses	

Organized Employee Groups	

Authorized Employee Representatives	

Employer Representatives Contacted		
Name	Title	Function
Megan McGuire	**Senior Manager**	**I O C**
Dan Huber	**Manager**	**I O C**
Rob Proffer	**Store Leader**	**I C**

Other Persons Contacted
(b) (7)(C) [redacted]

Entry	**08/05/11**		First Closing Conference	**08/05/11**	
Opening Conference	**08/05/11**		Second Closing Conference	**08/08/11**	
Walkaround	**08/05/11**		Exit	~~08/05/11~~ 8/8/11	
			Case Closed		

Penalty Reduction Factors					
Size	**30**	Good Faith	**15**	History	**0**

Followup Inspection?		Reason	

Coverage Information/Additional Comments

Aug. 5, 2011

CSHO arrived at the Apple Store in the Galleria shopping mall due to an employee complaint. Arrived at the front door and was greeted by a worker, discretely presented credentials and asked for a manager. It was a hectic day because it was the first day of the tax free shopping weekend in the State of Missouri. Senior Manager, Megan McGuire, arrived; presented credentials and explained purpose of visit. Went in the back office area to discuss further. Held opening conference, requested/received permission to proceed with inspection. Presented complaint items. Another manager was in the office, Dan Huber. Dan and Megan stated that they were aware of the concern regarding excessive stock and that the store just recently acquired a facility to store excessive stock. Noted that the electrical panels were blocked with boxes. Did not observe any blocked exits. The managers immediately had the stock in front of the electrical panels moved. There were 4 panels side by side as follows:

Panel # B1 Square D panel, 225-240 volts, manager believed it is for modules for lighting.

Panel B Square D panel, 225-240 volts, manager believed it is for receptacles.

Panel E Square D, 225-240 volts, receptacles, HVAC and water heaters. NQ224L2C.

Panel PP Square D, 208V/120 volts, 600 amps max, S/N 1228T880180010001, HCM91TSD. This appeared to control the 3 other panels.

Panels were labeled, but the managers weren't sure what the labels meant in some of the panels. Looked at a repeater for the cellular made by Siemens that didn't have a back on it. A feed from the box did not have the unused opening closed up. Requested that they obtain information on the equipment from AT&T who they said installed and maintains the equipment. Left site and arranged to return on Monday to interview workers since the facility was extremely congested due to the tax free shopping.

August 8, 2011

Interviewed complainant, (b) (7)(C) **over the phone. He stated that he thought that high voltage was anything over basic house voltage of 110 volts.**

Returned to interview workers. The area in front of the electrical panels was clear and taped off to alert workers of the importance of not storing product in front of the panels. The opening was not fixed, but the manager said that they are working on it.

Held closing and outlined the following:

1. **Blocking electrical panels**
2. **Opening where cable enters panel.**

Left site.

CSHO Signature		Date	
Accompanied By			

OSHA 1B

Worksheet

Mon Aug 22, 2011 6:01pm

Inspection Number	315814343
Opt. Insp. Number	2011-069

Establishment Name	APPLE, INC.				
Type of Violation	S Serious	Citation Number	01	Item/Group	001
Number Exposed	4	No. Instances	4	REC	C Complaint
Std. Alleged Vio.	1910.0303(g)(1)(ii)				

Abatement Period	MultiStep Abatements			Final Abatement	Action Type/Dates
	PPE Period	Plan	Report		
0					

Abatement Documentation Required	N	Date Verified		

Substance Codes	

AVD/Variable Information:

29 CFR 1910.303(g)(1)(ii): Working space about electric equipment rated 600 volts, nominal, or less was used for storage:

The working space in front of the 4 Square D electric panels, maximum 240 volts, were used for storage of store product.

Penalty Calculations				Adjustment Factors			Proposed Adjusted Penalty
Severity	Probability	Gravity	GBP	Size	Good Faith	History	
L Low	L Lesser	01	3000.00	30	15	0	1517.00
Repeat Factor		0					

Employee Exposure:	
Occupation	(b) (7)(C) [redacted]
Nr of Employees	
Employee Name	
Address	
Occupation	
Nr of Employees	
Employee Name	
Address	
Occupation	
Nr of Employees	
Employee Name	
Address	
Occupation	
Nr of Employees	
Employee Name	
Address	

Instance Description:	A. Hazard	B. Equipment	C. Location	D. Injury/Illness	E. Measurements

4. Date/Time
8/5/11

20. Instance Description - Describe the following:

a) Hazards-Operation/Condition-Accident

Complainant sent in a photo of electric panels that were blocked. CSHO arrived and 4 electric panels were still blocked with different product. Blocked panels will delay the ability to turn off a breaker in the event of an electrical fire, an electric short or someone being shocked.

b) Equipment - Lack of proper clearance in front of the 4 electric panels.
Panel B1 - Square D panel, 225-240 volts, modules for lighting
Panel B - Square D panel, 225-240 volts, receptacles
Panel E - Square D panel, 225-240 volts, NQ224L2C receptacles/HVAC/water heater
Panel PP - Square D, 225-240 volts, 600 amps, main breaker, 1228F880180010001, HCM91TSD.

c) Location - at the Apple Store in the Galleria Mall

d) Injury/Illness - blocked panels do not cause injuries but it can increase the response time to an emergency situation possibly increasing the severity of an injury.

e) Measurements - No clearance was provided in front of the 4 panels.

21. Photo Number	Location on Video
1-4	

23. Employer Knowledge: The panels were located outside of the managers office, Rob Proffer. Mr. Proffer stated that he thought the panels have been blocked only for a couple of days. Megan McGuire, Senior Manager, stated that they've recently obtained extra storage space to try to address the storage problem.

24. Comments (Employer, Employee, Closing Conference): (b) (7)(C) worker, stated that panels have been blocked since Feb or March when the IPAD II was launched. (b) (7)(C) worker, stated that he thought the panels have only been blocked for around 3 weeks.

25. Other Employer Information :

26. Classification:				
Serious	Knowledge	S or O	Repeat?	Willful?
Y	Y	S	N	N

First Repeat	Second Repeat	Repeat Penalty

Event Date	Event Code	Action Code	Citation Type	Penalty	Abate Date	Final Order
08/24/11	**Z Add transaction**	**A Add**	**S Serious**	**1517.00**		

U. S. Department of Lab
Occupational Safety and Health Administration

Worksheet

Mon Aug 22, 2011 6:01pm

Inspection Number	315814343
Opt. Insp. Number	2011-069

Establishment Name	APPLE, INC.				
Type of Violation	O Other	Citation Number	02	Item/Group	001
Number Exposed	0	No. Instances	1	REC	
Std. Alleged Vio.	1910.0305(b)(1)(i)				

Abatement Period	MultiStep Abatements			Final Abatement	Action Type/Dates
	PPE Period	Plan	Report		
30				10/10/11	

Abatement Documentation Required		Date Verified		

Substance Codes	

AVD/Variable Information:

29 CFR 1910.305(b)(1)(i): Openings through which conductors enter boxes, cabinets, or fittings were not effectively closed:

The opening where the cable exited the bottom of the electric box was not closed.
Location: Above the Siemens Repeater in the back office area of the Apple Store at the Galleria Mall.

Abatement certification and abatement documentation is required for this violation. The documentation should include written verification of abatement, applicable measurements or monitoring results, and photographs or videos which you believe will be helpful. The abatement certification sheet is enclosed with the citations.

Penalty Calculations				Adjustment Factors			Proposed Adjusted Penalty
Severity	Probability	Gravity	GBP	Size	Good Faith	History	
N Minimal	L Lesser	01	0.00	10	15	0	0.00
Repeat Factor		0					

Employee Exposure:

Instance Description: A. Hazard B. Equipment C. Location D. Injury/Illness E. Measurements

4. Date/Time
8/5/2011

20. Instance Description - Describe the following:

a) Hazards-Operation/Condition-Accident - the cable exiting the bottom of the electric box powering the Siemens repeater was not closed.

b) Equipment - The junction box connected to the Siemens Repeater.

c) Location - Above the Siemens Repeater on the wall in the back room of the Apple Store at the Galleria Mall in Richmonds Heights (St. Louis), MO.

d) Injury/Illness - N/A

e) Measurements - N/A

21. Photo Number	Location on Video
4	

23. Employer Knowledge: Manager, Rob Proffer, stated that he believed that the opening has existed since the installation. They have been at this location for about 1 year.

24. Comments (Employer, Employee, Closing Conference) :

25. Other Employer Information :

26. Classification:				
Serious	Knowledge	S or O	Repeat?	Willful?
N	Y	O	N	N

First Repeat	Second Repeat	Repeat Penalty

Event Date	Event Code	Action Code	Citation Type	Penalty	Abate Date	Final Order
08/24/11	**Z Add transaction**	**A Add**	**O Other**	**0.00**	**10/10/11**	

Photo Mounting Worksheet

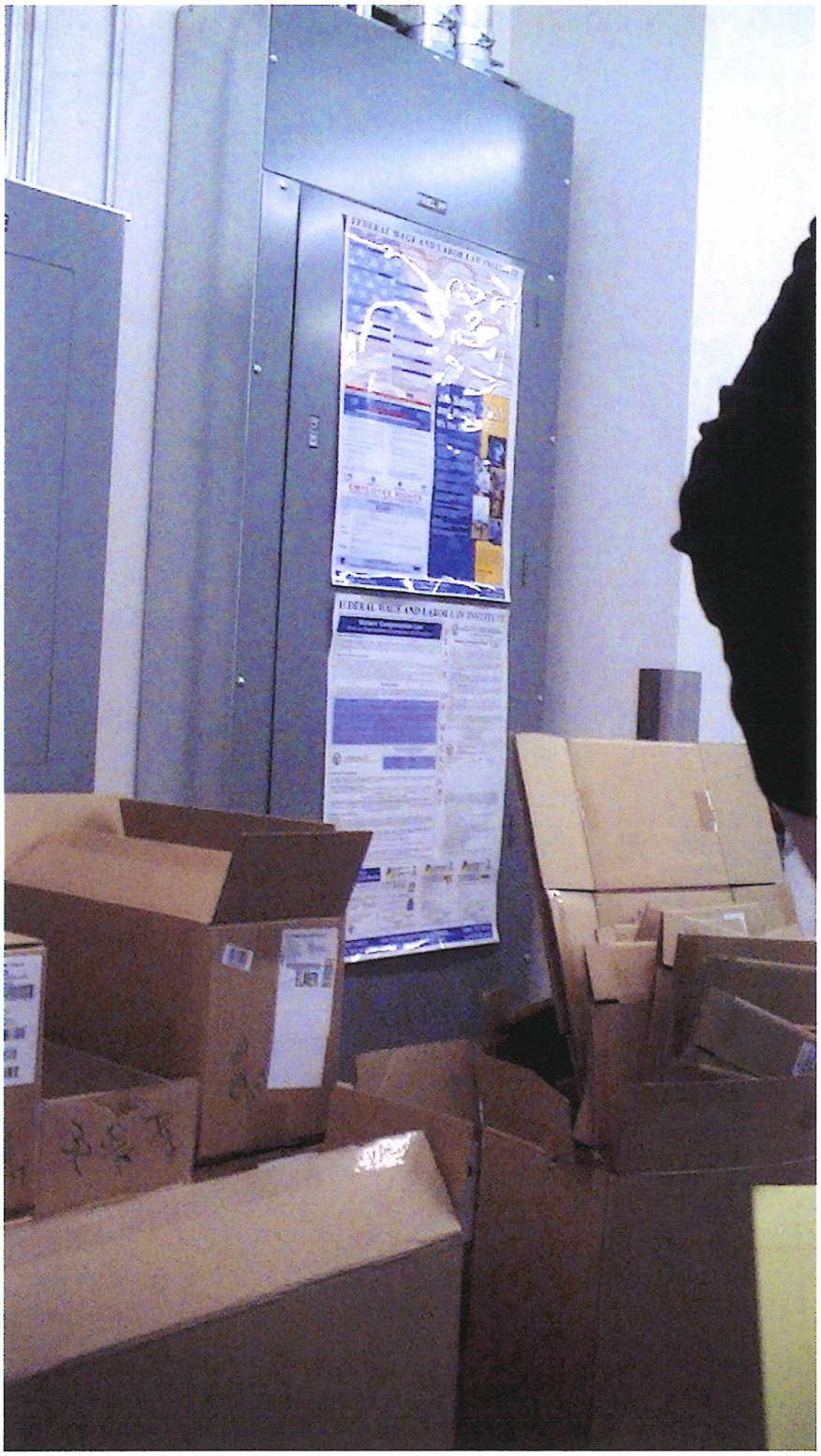
U.S. Department of Labor
Occupational Safety and Health Administration



Inspection Number		
315814343		
1. Photo ID No.	2. Date/Time	
1	**8/5/2011**	
3. Citation Number	4. Item Number	5. Instance No.
1910.303(g)(1)(ii)		
6. Location (Photo and Photographer)		
At the Apple Store in the Galleria Shopping Mall in the city of Richmond Heights, MO.		
7. Description Picture #1		
Photo of the blocked electrical panels.		

PHOTO 1

U.S. Department of Labor
Occupational Safety and Health Administration



Inspection Number		
315814343		
1. Photo ID No.	2. Date/Time	
2	**8/5/2011**	
3. Citation Number	4. Item Number	5. Instance No.
1910.303(g)(1)(ii)		

6. Location (Photo and Photographer)

At the Apple Store in the Galleria Shopping Mall in the city of Richmond Heights, MO.

7. Description Picture #2

Photo of the blocked electrical panels.

PHOTO 2



PHOTO 3

Inspection Number		
315814343		
1. Photo ID No.	2. Date/Time	
3	**8/8/2011**	
3. Citation Number	4. Item Number	5. Instance No.
1910.303(g)(1)(ii)		

6. Location (Photo and Photographer)

At the Apple Store in the Galleria Shopping Mall in the city of Richmond Heights, MO.

7. Description Picture #3

Photo of the electrical panels no longer blocked. Signs were put on the panels and the floor hatched. The hatched area was approximately 46" from the wall.

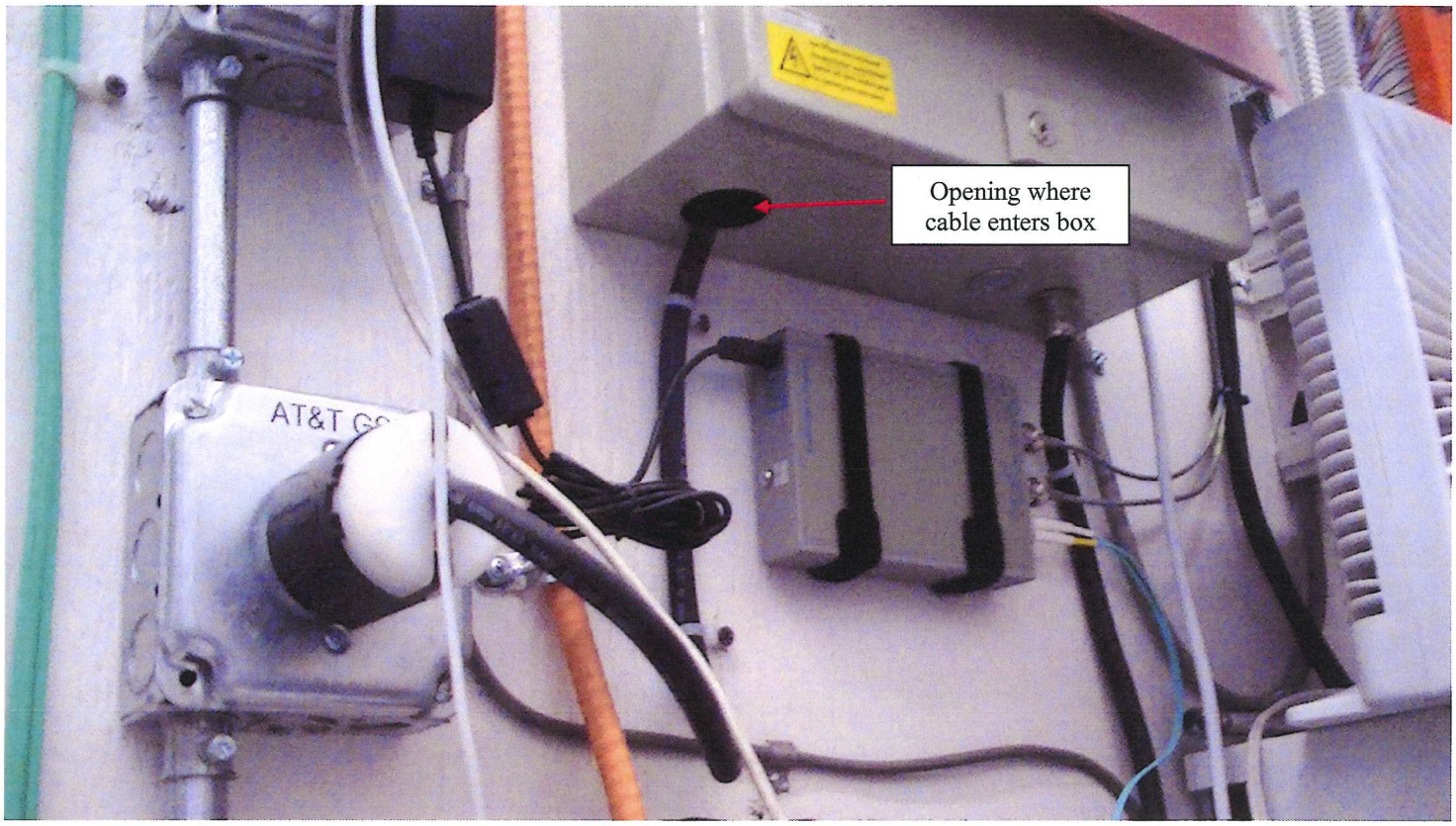


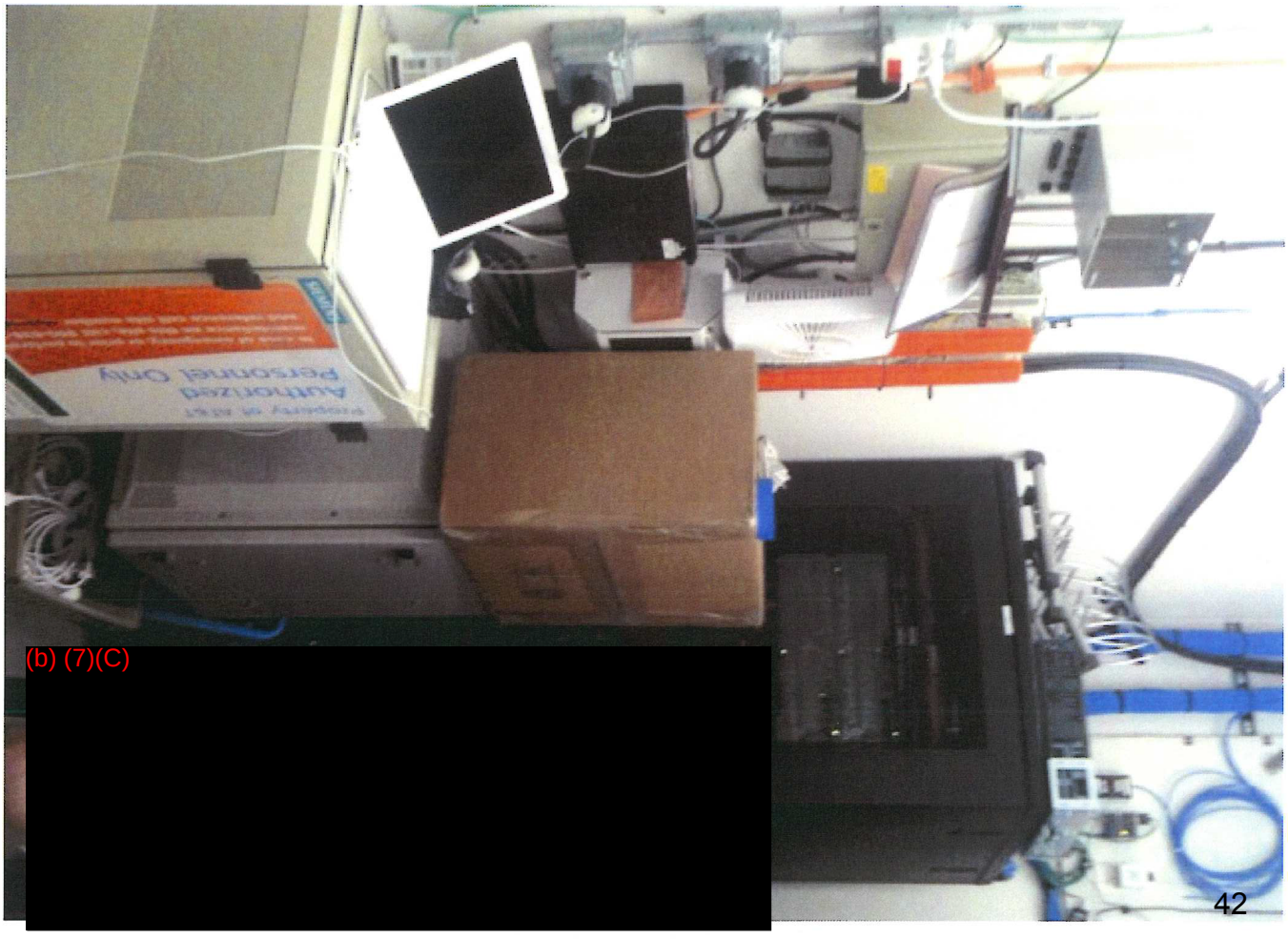
PHOTO 4

Inspection Number **315814343**		
1. Photo ID No. **4**	2. Date/Time **8/5/2011**	
3. Citation Number 1910.305(b)(1)(i)	4. Item Number	5. Instance No.
6. Location (Photo and Photographer) **At the Apple Store in the Galleria Shopping Mall in the city of Richmond Heights, MO.**		
7. Description Picture #4 **The opening where the cable exited the box was not closed.**		

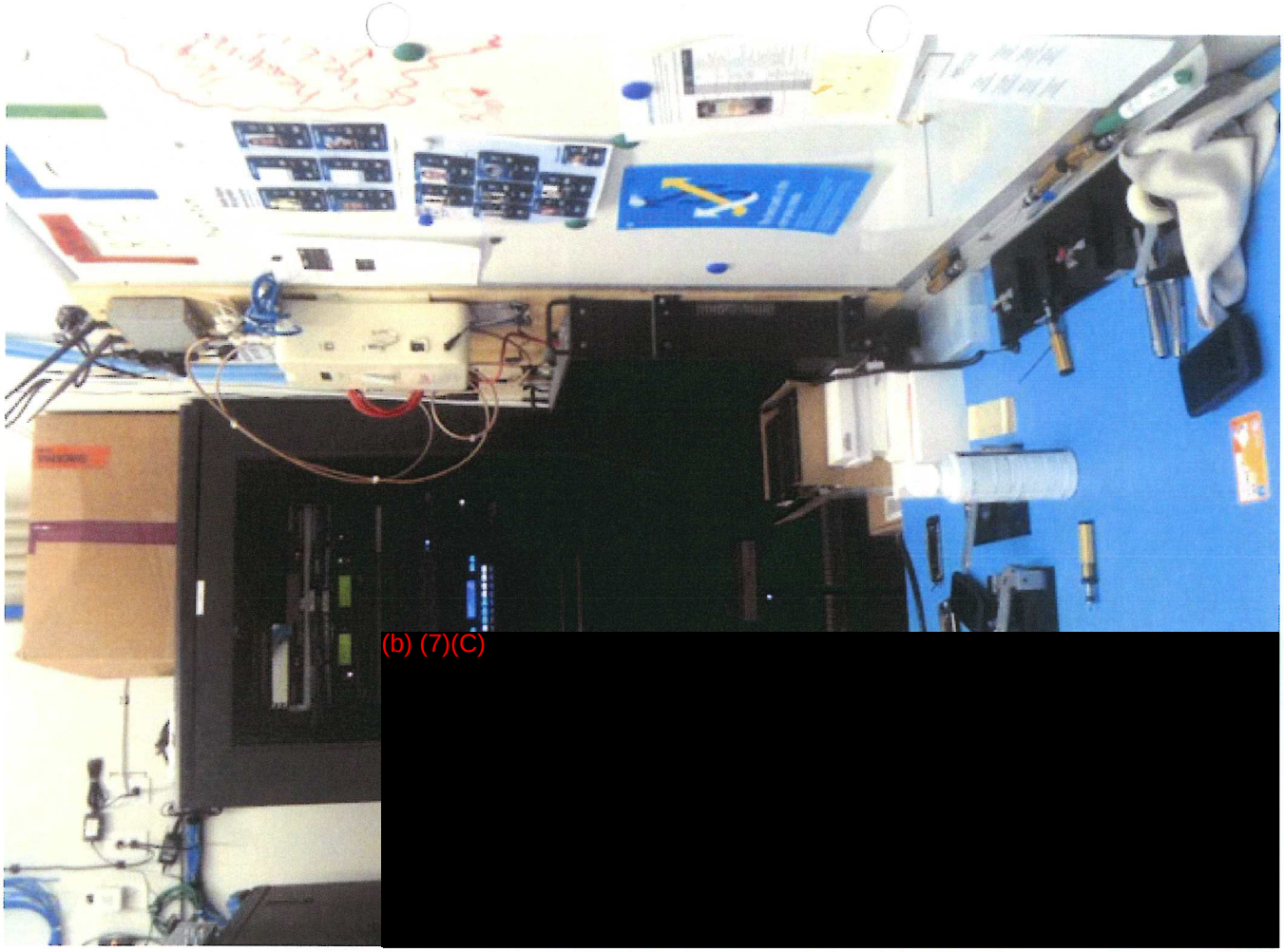
Complainant's

Photos





(b) (7)(C)


(b) (7)(C)



Photos
(OSHA 89

Field Notes



Saint Louis Galleria

Megan McGuire
Senior Manager

2440 Saint Louis Galleria
St. Louis, MO 63117
T 314 290-0400
F 314 290-0401

saintlouisgalleria@apple.com
www.apple.com/saintlouisgalleria



Saint Louis Galleria

Rob Proffer
Store Leader

2440 Saint Louis Galleria
St. Louis, MO 63117
T 314 290-0400
F 314 290-0401

saintlouisgalleria@apple.com
www.apple.com/saintlouisgalleria

I 3158143"3

Date: 8/5/11

OPENING CONFERENCE CHECKLIST

Company Name: APPLE STORE (ST LOUIS GALLERIA) Employer Representative Name: MEGAN MCGUIRE

Site Address: 2446 St Louis Galleria le 3117 Mailing Address: Same

EIN: 94-2404110 SIC Code: Retail Phone: 314-290-0488 Fax: 314-290-0401

Controlling Company/Entity: APPLE INC Hours Worked YTD:

Total # of Employees: ~~100~~ 99 # of Emp Covered by Inspection: 99 # Emp. Controlled by Emp ~~105~~ 69

COMPLETED?	STEPS	COMMENTS
√	Contacted Employer	Store opened in Oct
√	Presented Credentials	DAN Huber
√	Discussed Nature/Scope of Inspection	4½ ops
√	Requested Permission to Proceed	
√	Permission Granted?	
√	Exchange Business Cards	
N/A	Is there a Union?	
	Contacted Union Representative	
—	Checked VPP & SHARP	
√	Discussed "Plain View"/Walk-Around Procedures	
√	Discussed Private Employee Interviews	
√	Discussed 11(c)	
√	Discussed the use of Photographs, Videotapes and Other Measuring Equipment	
√	Discussed Trade Secrets	
√	Inquire if there are Classified Areas	
—	Discuss Sampling Procedures where Applicable	
√	Request Applicable Safety and Health Programs (e.g. Hazard Communication, PPE, etc.)	
	Request 3 years of Injury & Illness Records (e.g. OSHA 300 and 300A records)	

Recordable Injuries and Illness Rate = $\frac{\text{Total Inj/Illnesses x 200,000}}{\text{Total \# Emp. Hrs Worked}}$

DART (Injuries/Illness with Days Away& Restricted/Transferred Duties) Rate = $\frac{\text{Total Injuries/Illnesses with Days Away/Restricted Duty/Transfer (columns H&I) x 200,000}}{\text{Total \# Emp. Hrs Worked}}$

DAFWII (Days Away From Work - Injuries/Illness) Rate = $\frac{\text{Total Injuries/Illnesses with Days Away (column H only) x 200,000}}{\text{Total \# Emp. Hrs Worked}}$

29 CFR 1904.2, 4, 5, and 6 Injury and Illness Recordkeeping and Reporting	29 CFR 1910.132 Personal Protective Equipment (Hazard Assessments)
29 CFR 1910.1020 Access to Employee Exposure and Medical Records	29 CFR 1910.134 Respiratory Protection
29 CFR 1910.38 Emergency Action and Fire Prevention Plans	29 CFR 1910.146 Permit Required Confined Spaces
29 CFR 1910.95 Hearing Conservation Program	29 CFR 1910.147 Control of Hazardous Energy Sources (Lockout/Tagout)
29 CFR 1910.119 Process Safety Management of Highly Hazardous Chemicals	29 CFR 1910 Subpart Z Toxic and Hazardous Substances
29 CFR 1910.120 Hazardous Waste Operations and Emergency Response	

315814343

Date: 8-8-2011

OPENING CONFERENCE CHECKLIST

Company Name: APPLE

Employer Representative Name: Rob Proffer STORE LEADER

Site Address: 2440 St Louis Galleria

Mailing Address: SAM

MO TAX ID

EIN: ~~115485411~~ EIN 94-2404110

SIC Code: _____ Phone: _____ Fax: _____

Controlling Company/Entity: _____ Hours Worked YTD: _____

Total # of Employees: ____ # of Emp Covered by Inspection: ____ # Emp. Controlled by Emp ____

COMPLETED?	STEPS	COMMENTS
✓	Contacted Employer	6 yrs
✓	Presented Credentials	
✓	Discussed Nature/Scope of Inspection	
✓	Requested Permission to Proceed	
✓	Permission Granted?	
✓	Exchange Business Cards	
✓	Is there a Union?	
✓	Contacted Union Representative	
✓	Checked VPP & SHARP	
✓	Discussed "Plain View"/Walk-Around Procedures	
✓	Discussed Private Employee Interviews	
✓	Discussed 11(c)	
✓	Discussed the use of Photographs, Videotapes and Other Measuring Equipment	
✓	Discussed Trade Secrets	
✓	Inquire if there are Classified Areas	
✓	Discuss Sampling Procedures where Applicable	
✓	Request Applicable Safety and Health Programs (e.g. Hazard Communication, PPE, etc.)	
✓	Request 3 years of Injury & Illness Records (e.g. OSHA 300 and 300A records)	N/A Partially exempt

Recordable Injuries and Illness Rate = $\frac{\text{Total Inj/Illnesses x 200,000}}{\text{Total \# Emp. Hrs Worked}}$

DART (Injuries/Illness with Days Away& Restricted/Transferred Duties) Rate = $\frac{\text{Total Injuries/Illnesses with Days Away/Restricted Duty/Transfer (columns H&I) x 200,000}}{\text{Total \# Emp. Hrs Worked}}$

DAFWII (Days Away From Work - Injuries/Illness) Rate = $\frac{\text{Total Injuries/Illnesses with Days Away (column H only) x 200,000}}{\text{Total \# Emp. Hrs Worked}}$

29 CFR 1904.2, 4, 5, and 6 Injury and Illness Recordkeeping and Reporting	29 CFR 1910.132 Personal Protective Equipment (Hazard Assessments)
29 CFR 1910.1020 Access to Employee Exposure and Medical Records	29 CFR 1910.134 Respiratory Protection
29 CFR 1910.38 Emergency Action and Fire Prevention Plans	29 CFR 1910.146 Permit Required Confined Spaces
29 CFR 1910.95 Hearing Conservation Program	29 CFR 1910.147 Control of Hazardous Energy Sources (Lockout/Tagout)
29 CFR 1910.119 Process Safety Management of Highly Hazardous Chemicals	29 CFR 1910 Subpart Z Toxic and Hazardous Substances
29 CFR 1910.120 Hazardous Waste Operations and Emergency Response	

Date: 8-8-11

CLOSING CONFERENCE CHECKLIST

Company Name: APPLE INC.

Employer Representatives Present:

Name:	Title/Position:
Rob Proffer	Store Leader

COMPLETED?	STEPS	COMMENTS
✓	Alleged Violations (list under comments)	blocking panels believes it has only been like that for a couple of days
✓	Abatement Time	corrected
✓	Abatement Date Modification: (Notify ASAP and provide reasons)	4/6" hatched off
✓	Length of time to send out paperwork	
✓	Penalties Categories (Serious, Other, Repeat, Willful, Failure to Abate)	
✓	Penalty Reduction Factors: Size, Good Faith, History	
✓	Posting Requirements (3 working days or until items are corrected)	
✓	Documentation of Corrective Action	
✓	Complying with Citation (penalty must be paid within 15 working days unless contesting citation)	
✓	Informal Settlement Conference	
✓	Contest Procedure	
✓	Penalties for Failure to Abate	

(b) (7)(C), (b) (7)(E) [redacted]

From: Robert Proffer [rproffer@apple.com]
Sent: Wednesday, August 10, 2011 1:59 PM
To: (b) (7)(C), (b) (7)(E) [redacted]
Subject: Fwd: OSHA updates

(b) (7)(C), (b) (7)(E) [redacted]

Wanted to let you know the progress.

Thanks
Rob Proffer

Begin forwarded message:

> **From:** Megan <megan_mcguire@apple.com>
> **Subject: OSHA updates**
> **Date:** August 10, 2011 1:42:45 PM CDT
> **To:** Galleria Managers <galleriamanagers@group.apple.com>
> **Cc:** Daryl Allaman <allaman@apple.com>
>
> Guys-
>
> ATT will be out this afternoon to replace the door on the repeater and to cover the other box. They said that the other box does not need to be moved.
>
> Also the 1st electrical panel is for our lighting control panel so we will need to just label MOD for lighting control panels...apparently we should have a lighting control that will match up with each the breakers.
>
> That is all she wrote:)
>
> Megan McGuire
> □ Senior Manager
> Apple St Louis Galleria

Rob Proffer
Apple Store Saint Louis Galleria
2440 Saint Louis Galleria

Richmond Heights, MO
Store Phone: 314-290-0400
Business Phone:
Business Email:saintlouisbusiness@apple.com
apple.com/retail/saintlouisgalleria

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Note Taking Sheet

U.S. Department of Labor

Occupational Safety and Health Administration

Page 1 of 1

Date: 8/5/11

Company	Inspection Location	Inspection Number
APPLE INC		

Safety – employee training
"Retail Me" training - computer based training.
Corp. Mandated trng (annually) gets emailed to them

Panel B1 SQUARE D 225-240 Volts
Believes for modules for lighting
Panel B SQUARE D 225-240 Volts
Receptacles
Panel E SQUARD 225-240 Volts
NQ224L2C Recept/HVAC/Water Heaters
Panel PP 122847880180010001
HCM91TSD MAX 208V/120 VAC MAX AMPS
SQUARD Main Breakers Control 600
Other panels

- Siemens (believe it is a repeater for Cellular)

(b) (7)(C)

(b) (7)(C)

(b) (7)(C)

(b) (7)(C)

(b) (7)(C)

(b) (7)(C)

Hazard Communication Program

It is likely that you will work with or be exposed to chemical substances (such as cleaning supplies, permanent markers, and toner cartridges) during your employment. These chemical substances may be considered toxic or hazardous, but are safe when used properly.

The Hazard Communication Program is required by the Occupational Health and Safety Administration (OSHA) and includes the following:

- Instructions on how to obtain information on chemical products used in the store.
- A labeling system, including safety information for all containers of chemical products used in the store.
- Training to ensure that employees are aware of the hazardous chemicals found in the workplace. This training must include safe handling procedures and instruction on any protective equipment. You can find this training online at the Apple Sales Training on RetailMe.

General Rules for Working with Hazardous Materials

- Use only products listed on the store supply list, or products provided by your designated cleaning service. Do not buy or bring other supplies into the store.

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- Read and follow the directions on product containers. If there is no product label, do not use the product. If the label does not provide all the information you need, consult the Material Safety Data Sheet (MSDS) available on RetailMe and in your store's Retail Facilities Binder.
- Always use any protective equipment (such as rubber gloves) as advised.

Contractors and Vendors

All contractors and vendors are required to notify a member of the management team of any potentially hazardous substances they plan to bring into the store, before they bring the substance into the store. You must request the Material Safety Data Sheet (MSDS) of any product before allowing the contractor or vendor to perform services.

Container Labeling

All containers of hazardous substances must have a legible label that lists the contents, any hazard warnings, and the name and address of the manufacturer.

Any product with a label that has become illegible or that has been removed must be disposed of immediately.

Emergency and First Aid

Type of Exposure	Emergency/First Aid Procedures
Eye contact	If necessary, remove contact lenses. Flush eyes with water for 15 to 20 minutes. Seek medical attention.
Skin contact	Remove contaminated clothing and wash skin thoroughly with soap and water. Seek medical attention.

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Type of Exposure	Emergency/First Aid Procedures
Inhalation	If overcome with vapors, move away from the product and into fresh air. Seek medical attention.
Ingestion	Call for emergency medical aid immediately. If advised, induce vomiting.

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(b) (7)(C)

(b) (7)(C)

U.S. Department of Labor
OSHA IntraNet
OSHA Public Site
intranet.osha.gov | Labornet | RegionNet | Search: on Intranet GO Advanced Search

Establishment Search Results - APPLE STORE

Details for the inspections listed below may be obtained in two ways. The first method is simply following the inspection activity number link. The second method is marking the check boxes for selected inspections and pressing the *Get Detail* button. Information relevent to the selected cases will be returned and may then be browsed or printed. For information on the data elements displayed below, see definitions.

Please note that inspections which are known to be incomplete will have the identifying Activity Nr shown in italic. Information for these open cases is especially dynamic, e.g., violations may be added or deleted.

☐ **Public Internet Detail** -- Check this box to obtain level of Inspection detail available to non-OSHA users. Then check individual inspection boxes and click Get Detail.

Search Options							
Establishment	**Date Range**		**RID**	**State**	**Limits**	**Include**	**Exclude**
APPLE STORE	2004-07-01	2011-12-31	All	All	100/2500		

Get Detail | + | All | Reset — **Found 2 -- Processed 2 -- Selected 2 -- Displayed 2**

		Activity	Opened	RID	St	Type	Sc	SIC	NAICS	Vio	Establishment Name	
☐	1	313852766	10/08/2009	0552700	MN	Complaint	Part	5045	423430		Apple Store - Rosedale Center	N073 000066459
☐	2	120197298	07/22/2004	0950621	CA	Complaint	Part	2711	511110		Freedom Comm. Inc Dba Yuba Sutter Appeal-Democrat	N092 000025005

Occupational Safety & Health Administration
200 Constitution Avenue, NW
Washington, DC 20210

NO History